Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Christopher First name  William Roy Middle name  Laney Last name and Suffix (Sr., Jr., II, III)	Crystal First name  Renee Middle name  Laney Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3137	xxx-xx-6873			

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live	5931 Summerfield Road Petersburg, MI 49270	If Debtor 2 lives at a different address:				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Monroe					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Debtor 1 Christopher Willia Crystal Renee Lan				iney			Case number (if known)	
Par	t 2:	Γell the Court About \	our Bank	ruptcy Ca	ase			
7.	Bank	hapter of the ruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for e box.	· Bankruptcy
	cnoo	sing to file under	■ Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8. How you will pay the fee  I will pay the entire fee when I file my petition. Plabout how you may pay. Typically, if you are paying order. If your attorney is submitting your payment or a pre-printed address.							urself, you may pay with cash, cashier's cl alf, your attorney may pay with a credit car	heck, or money d or check with
			☐ I ne	ed to pa	y the fee in instal	Iments. If you choose this option Official Form 103A).	n, sign and attach the Application for Indiv	iduals to Pay
			☐ I re	quest that is not red blies to yo	at my fee be waiv juired to, waive yo ur family size and	ed (You may request this option ur fee, and may do so only if you you are unable to pay the fee in	only if you are filing for Chapter 7. By law ur income is less than 150% of the official installments). If you choose this option, you ial Form 103B) and file it with your petition	poverty line that ou must fill out
				т.рршоси.		aptor r ming r oo marvou (omo	iai i omi 1005) and mo i mai you poulo	· 
9.	bank	you filed for ruptcy within the	■ No.					
	IdSLO	years?	☐ Yes.	District		When	Case number	
				District		When	Coop number	
				District		When	Case number	
10	Are a	ny bankruptcy						
10.	cases filed not fi you,	s pending or being by a spouse who is ling this case with or by a business er, or by an	■ No □ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your ence?	■ No.	Go to	line 12.			
	iesiu	ence:	☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	t you and do you want to stay in your resid	ence?
					No. Go to line 12			
					Yes. Fill out <i>Initia</i> bankruptcy petition		ludgment Against You (Form 101A) and fil	e it with this

	otor 1 Christopher Willia otor 2 Crystal Renee Lar		aney		Case number (if known)				
Par	t 3: Report About Any Bu	sinesses	You Owr	n as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to						
		☐ Yes.	Name	and location of bus	siness				
	A sole proprietorship is a business you operate as		Nome	e of business, if any					
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	te & ZIP Code				
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:				
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))				
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
				None of the above	e				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate addines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedul 11 U.S.C. 1116(1)(B).						
	For a definition of small	■ No.	I am i	not filing under Chap	oter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am i Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am i	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.							
	alleged to pose a threat	☐ Yes.							
	of imminent and identifiable hazard to public health or safety?		What is	the hazard?					
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?					
					Number, Street, City, State & Zip Code				

## Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Christopher Willia tor 2 Crystal Renee La		aney		Case numl	ber (if known)			
Pari	6: Answer These Quest	tions for R	eporting Purposes						
	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.	· •					
			Yes. Go to line 17.						
		16b.	Are your debts primarily busine money for a business or investme						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe the	hat are not consu	mer debts or busin	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	to to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be availab			operty is excluded and administrative expenses rs?			
	are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		Yes						
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,00°		□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,000 □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		\$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		<b>—</b> \$500,	001 - \$1 Hillion						
Part	Sign Below								
For	you	I have ex	camined this petition, and I declare	under penalty of p	perjury that the info	ormation provided is true and correct.			
						le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
I understa			uest relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
			understand making a false statement, concealing property, or obtaining money or property by fraud in connection wit ankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134 and 3571						
		/s/ Chri	stopher William Roy Laney		/s/ Crystal Ren				
			pher William Roy Laney e of Debtor 1		Crystal Renee Signature of Deb				
		Executed				une 23, 2017			
			MM / DD / YYYY		IVI	IM / DD / YYYY			

	stopher Willia stal Renee La	am Roy Laney ney	Cas	Case number (if known)				
For your attorner represented by If you are not rean attorney, you	presented by do not need	under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify tha	ition, declare that I have informed the debtor(s) about eligibility to proce States Code, and have explained the relief available under each chapte I have delivered to the debtor(s) the notice required by 11 U.S.C. § 34 ertify that I have no knowledge after an inquiry that the information in the					
to file this page	•	/s/ Jahn F. Landis Signature of Attorney for Debtor	Date	June 23, 2017 MM / DD / YYYY				
		Jahn F. Landis Printed name Lennard Graham & Goldsmith PLC						
		Firm name  222 Washington Street  Monroe, MI 48161-2146  Number Street City State & 7/IP Code						

Email address

Bar number & State

Contact phone **734-242-9500** 

Fill	in this informa	ation to identify your case:			
	otor 1	Christopher William Roy Laney			
Dak	ator O	First Name Middle Name Last Name			
	otor 2 use if, filing)	Crystal Renee Laney       First Name     Middle Name       Last Name			
Uni	ted States Bank	cruptcy Court for the: EASTERN DISTRICT OF MICHIGAN			
Cas	se number				
(if kn	own)				ck if this is an ended filing
		m 106Sum			
		Your Assets and Liabilities and Certain Statistical Information			12/15
info	rmation. Fill ou r original form	ed accurate as possible. If two married people are filing together, both are equally responsible for the all of your schedules first; then complete the information on this form. If you are filing amend s, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ed s	chec	dules after you file
					assets e of what you own
1.		3: Property (Official Form 106A/B) 55, Total real estate, from Schedule A/B		\$	140,000.00
		62, Total personal property, from Schedule A/B		* — \$	
				_	38,100.00
	1c. Copy line	63, Total of all property on Schedule A/B		\$	178,100.00
Par	t 2: Summar	rize Your Liabilities			
					liabilities unt you owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		\$_	151,072.00
3.		: Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$_	76,106.50
	3b. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$_	53,922.45
		Your total liabilities	\$_		281,100.95
Par	t 3: Summa	rize Your Income and Expenses			
4.		our Income (Official Form 106I) mbined monthly income from line 12 of Schedule I		\$	4,652.58
5.		our Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J		\$	4,299.00
Par	t 4: Answer	These Questions for Administrative and Statistical Records			
6.		g for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur ot	her s	chedules.
7.	■ Yes What kind of	debt do you have?			

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,951.40

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	76,106.50
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	76,106.50

Debtor 1		ctanhar	William Roy La	nov					
	First Na			Name	Last Name				
Debtor 2			ee Laney						
Spouse, if filing	•			Name	Last Name				
Jnited Sta	ates Bankruptcy	Court for	the: EASTERN	DISTR	ICT OF MICHIGAN				
Case num	nber								Check if this is a
									amended filing
· · ·		00 A /D							
	l Form 10		-						
<u>sche</u>	dule A/I	<b>B:</b> Pr	operty						12/15
nswer eve	ery question.	·	·		his form. On the top of any additional pages I Estate You Own or Have an Interest In				
Do you o	own or have any l	egal or eq	uitable interest in a	ny resid	lence, building, land, or similar property?				
□ No. Go	o to Part 2.								
_	Where is the prope	arty?							
		y .							
.1				Wha	t is the property? Check all that apply				
	1 Summerfield		and the state of		Single-family home		not deduct secured claims or exemptions. Put		
Street	address, if available,	or other desi	cription		Duplex or multi-unit building		ount of any secured claims on Schedule D: ors Who Have Claims Secured by Property.		
					Condominium or cooperative				
					Manufactured or mobile home	Current va	lue of the	Cur	rent value of the
Pete	ersburg	MI	49270-0000			entire prop	erty?		tion you own?
City		State	ZIP Code			\$14	0,000.00		\$140,000.00
									vnership interest by the entireties, o
					has an interest in the property? Check one	a life estat	e), if known.	•	,
Mon	roo					Fee sim	oie		
County					Debtor 2 only  Debtor 1 and Debtor 2 only				
County	,				•		if this is com	munit	y property
					r information you wish to add about this ite erty identification number:	m, such as lo	cal		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debte Debte		Christopher William Roy Lar Crystal Renee Laney	ney	Case number (if known)		
3. <b>Ca</b>	rs, van	s, trucks, tractors, sport utility v	ehicles, motorcycles	-		
	No Yes					
3.1 Make:  Model:  Year:  Approx		D 0500	Ram 2500       □ Debtor 1 only         2009       □ Debtor 2 only		cured claims or exemptions. Put y secured claims on Schedule D: ave Claims Secured by Property.  the Current value of the portion you own?	
	Other	information:	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$22,000.	922,000.00	
3.2	Make:	Journey	Who has an interest in the property? Check one	the amount of any s	red claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property.	
	Other	2016  ximate mileage: 20000 information:  Car is under lease through	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of th entire property?	e Current value of the portion you own?	
		sler Capital	Check if this is community property (see instructions)	<b>\$0.</b>	\$0.00	
4.1	No Yes Make:	Denali	Who has an interest in the property? Check one			
4.1	Model:		Debtor 1 only	the amount of any s	red claims or exemptions. Put ecured claims on Schedule D: e Claims Secured by Property.	
	Year:	2006 information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of th entire property?	e Current value of the portion you own?	
		Fifth Wheel Camper	Check if this is community property (see instructions)	\$6,000.0	\$6,000.00	
			wn for all of your entries from Part 2, including that number here		\$28,000.00	
Part S Do y		cribe Your Personal and Household n or have any legal or equitable i	tems nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
E		ld goods and furnishings s: Major appliances, furniture, linen	s, china, kitchenware		ciainis of exemplions.	
	Yes. D	Describe				
			vision, Sofa, Children's Bedroom sets, B able and Chairs, Bric Brac	edroom	\$2,500.00	

Official Form 106A/B Schedule A/B: Property page 2

	ebtor 1 ebtor 2	Christopher Crystal Rene	William Roy Laney e Laney Case number	(if known)
7.	Electroni Example	s: Televisions ar	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners ohones, cameras, media players, games	s; music collections; electronic devices
	Yes.	Describe		
			Computer, washer and dryer, dishwasher, refridgerator,	\$2,500.00
8.	Example  No	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stans, memorabilia, collectibles	amp, coin, or baseball card collections;
	☐ Yes. I	Describe		
9.		ent for sports and ses: Sports, photogonusical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	_	Describe		
10.	. <b>Firearm</b> <i>Exampl</i> No		, shotguns, ammunition, and related equipment	
	Yes.	Describe		
			DPMS AR-15; Springield XDM .45; Springfield SDSD 9mm	\$1,500.00
11.	□ No		thes, furs, leather coats, designer wear, shoes, accessories	
			Debtor 1 personal clothing	\$500.00
			Debtor 2 personal clothing	\$500.00
			Children's clothing	\$500.00
12.	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches  Wedding Ring and other jewelry	s, gems, gold, silver
			meading iting and other jewenly	Ψ1,300.00
13.	Example ■ No	<b>m animals</b> les: Dogs, cats, b	irds, horses	
14.		er personal and	household items you did not already list, including any health aids you did r	not list
	■ No	Give specific info	urmation	
	<b>-</b> 1€5. (	Oive shedilic illic	nnau01	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Christopher William Roy Laney		
Debtor 2	Crystal Renee Laney	Case number (if known)	
	the dollar value of all of your entries from P Part 3. Write that number here	art 3, including any entries for pages you have attached	\$9,500.00
_		1	
	escribe Your Financial Assets		
Do you o	own or have any legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	nples: Money you have in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petition	on
<b>—</b> 163		Cash	\$300.00
	sits of money nples: Checking, savings, or other financial accounts institutions. If you have multiple accounts	punts; certificates of deposit; shares in credit unions, brokerage has with the same institution, list each.	ouses, and other similar
□ No ■ Yes	i	Institution name:	
_ 100		Monroe County Community Credit Union	
	17.1.	Checking Acct.	\$300.00
■ No	nples: Bond funds, investment accounts with bro		
	publicly traded stock and interests in incorport	orated and unincorporated businesses, including an interest	t in an LLC, partnership, and
■ No			
☐ Yes	:. Give specific information about them	% of ownership:	
Nego Non-		otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
■ No			
□ res	s. Give specific information about them Issuer name:		
	ement or pension accounts nples: Interests in IRA, ERISA, Keogh, 401(k), 4	103(b), thrift savings accounts, or other pension or profit-sharing p	olans
	s. List each account separately.  Type of account:	Institution name:	
Your <i>Exan</i>		that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compan	ies, or others
■ No □ Yes	S	Institution name or individual:	
23. <b>Annu</b> <b>II</b> No	ities (A contract for a periodic payment of mone	ey to you, either for life or for a number of years)	
	Issuer name and description.		
	sts in an education IRA, in an account in a q 6.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition pro	gram.

Schedule A/B: Property Official Form 106A/B page 4 Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com Best Case Bankruptcy 17-49379-mbm Doc 1 Filed 06/23/17 Entered 06/23/17 17:32:12 Page 13 of 66

	ebtor 1 ebtor 2		her William Roy Laney enee Laney	Case number (if known)	
	_	Orystal IX	ence Laney		
	■ No □ Yes		Institution name and description. Separately file the	e records of any interests 11 U.S.C. & 521(c):	
				- ',	
25.	Trusts, ∈	equitable o	r future interests in property (other than anything	ı listed in line 1), and rights or powers exercis	sable for your benefit
		Give specific	c information about them		
			s, trademarks, trade secrets, and other intellectua	al proporty	
20.			domain names, websites, proceeds from royalties ar		
	■ No	o			
	⊔ Yes. (	Give specific	c information about them		
27.			es, and other general intangibles permits, exclusive licenses, cooperative association	holdings, liquor licenses, professional licenses	
	☐ Yes. (	Give specific	c information about them		
M	oney or p	roperty ow	ed to you?		Current value of the
					portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu ■ No	unds owed	to you		
		Give specific	information about them, including whether you alread	dy filed the returns and the tax years	
29.	Family s Example ■ No		e or lump sum alimony, spousal support, child suppo	rt, maintenance, divorce settlement, property sett	tlement
	☐ Yes. G	Give specific	information		
30.	Exampl	les: Unpaid v	neone owes you wages, disability insurance payments, disability bene ; unpaid loans you made to someone else	fits, sick pay, vacation pay, workers' compensat	ion, Social Security
	■ No	Give specific	c information		
31.			nce policies disability, or life insurance; health savings account (H	ISA); credit, homeowner's, or renter's insurance	
		Name the ins	surance company of each policy and list its value.		
			Company name:	Beneficiary:	Surrender or refund value:
32.	If you a		perty that is due you from someone who has died iciary of a living trust, expect proceeds from a life ins		property because
	■ No	o			
	⊔ Yes. (	Give specific	c information		
33.			d parties, whether or not you have filed a lawsuit ts, employment disputes, insurance claims, or rights		
		Describe ea	ch claim		
34.	_	ontingent a	nd unliquidated claims of every nature, including	counterclaims of the debtor and rights to set	t off claims
	■ No □ Yes. I	Describe ea	ch claim		
35.	Any fina	ancial asset	ts you did not already list		

Official Form 106A/B Schedule A/B: Property page 5 Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com Best Case Bankruptcy 17-49379-mbm Doc 1 Filed 06/23/17 Entered 06/23/17 17:32:12 Page 14 of 66

Deb Deb	or 1 Christopher William Roy Laney or 2 Crystal Renee Laney		Case number (if known)	
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here			\$600.00
Part	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
37. <b>C</b>	o you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
D		0		
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st in.	
46. l	o you own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
53.	to you have other property of any kind you did not already list	?		
	Examples: Season tickets, country club membership  No			
_	Yes. Give specific information			
			1	
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$140,000.00
	Part 2: Total vehicles, line 5	\$28,000.00		
	Part 3: Total personal and household items, line 15	\$9,500.00		
	Part 4: Total financial assets, line 36	\$600.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$38,100.00	Copy personal property to	otal <b>\$38,100.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$178,100.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	Christopher Willia	am Roy Laney		
	First Name	Middle Name	Last Name	<del></del>
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

Part 1: Identify the Property You Claim as Exempt

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.									
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	and the second s		Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
De	ebtor 1 Exemptions 5931 Summerfield Road Petersburg,	\$140,000.00			11 U.S.C. § 522(d)(1)				
	MI 49270 Monroe County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2009 Dodge Ram 2500 125000 miles Line from Schedule A/B: 3.1	\$22,000.00		\$0.00	11 U.S.C. § 522(d)(2)				
	Line IIOIII Schedule AVD. 3.1			100% of fair market value, up to any applicable statutory limit					
	2016 Dodge Journey 20000 miles This Car is under lease through	\$0.00		\$0.00	11 U.S.C. § 522(d)(2)				
	Chrysler Capital Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	Computer, washer and dryer, dishwasher, refridgerator,	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: <b>7.1</b>	_		100% of fair market value, up to any applicable statutory limit					
	DPMS AR-15; Springield XDM .45; Springfield SDSD 9mm	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 4

		description of the property and line on lule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
		or 1 personal clothing	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)	
	Lille i	IOIII Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
	Children's clothing Line from Schedule A/B: 11.3		\$500.00		\$500.00	11 U.S.C. § 522(d)(3)	
	Lille	om schedule A/D. 11.3			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1		\$300.00		\$300.00	11 U.S.C. § 522(d)(5)	
	LIIIG	om schedule A/D. 10.1			100% of fair market value, up to any applicable statutory limit		
3.		ou claiming a homestead exemption ect to adjustment on 4/01/19 and every			ed on or after the date of adjustme	nt.)	
		No					
		es. Did you acquire the property cove	red by the exemption wi	thin 1	215 days before you filed this case	?	
	I	□ No					
	I	☐ Yes					

Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2	Crystal Renee La	iney		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number				
(if known)				☐ Check if this is an amended filing
Official Ea	106C			

## Official Form 106C

Part 1: Identify the Property You Claim as Exempt

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
<u>De</u>	ebtor 2 Exemptions 2006 Denali 2006 Fifth Wheel Camper Line from Schedule A/B: 4.1	\$6,000.00		\$6,000.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)				
	Furniture, Television, Sofa, Children's Bedroom sets, Bedroom Set, Kitchen Table and Chairs, Bric Brac Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)				
	Debtor 2 personal clothing Line from Schedule A/B: 11.2	\$500.00		\$500.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

\$1,500.00

page 3 of 4

11 U.S.C. § 522(d)(4)

Wedding Ring and other jewelry

Line from Schedule A/B: 12.1

\$1,500.00

100% of fair market value, up to any applicable statutory limit

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	,		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Monroe County Community Credit Union Checking Acct.	\$300.00	\$300.00 Sample 100% of fair market value, up to any applicable statutory limit		11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1					
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)	
	No					
	☐ Yes. Did you acquire the property cover	ed by the exemption wit	hin 1	,215 days before you filed this case	9?	
	□ No					
	☐ Yes					

Fill in this information to identify	y vour case:			
	r William Roy Laney			
First Name	Middle Name Last Name		-	
Debtor 2 Crystal Ren	ee Laney			
(Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court fo	r the: EASTERN DISTRICT OF MICHIGAN			
Casa number				
Case number			☐ Check	if this is an
			ameno	led filing
O(()				
Official Form 106D				
Schedule D: Credit	ors Who Have Claims Secured	d by Propert	У	12/15
	sible. If two married people are filing together, both are eq fill it out, number the entries, and attach it to this form. O			
1. Do any creditors have claims secu	red by your property?			
	omit this form to the court with your other schedules. Y	ou have nothing else t	to report on this form	
Yes. Fill in all of the information	•	11		
		Column A	Column B	Column C
for each claim. If more than one credit	r has more than one secured claim, list the creditor separately or has a particular claim, list the other creditors in Part 2. As nabetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Chrysler Capital	Describe the property that secures the claim:	\$4,625.00	\$0.00	\$4,625.00
Creditor's Name	2016 Dodge Journey 20000 miles			
	This Car is under lease through			
DO Dov 064245	Chrysler Capital  As of the date you file, the claim is: Check all that			
PO Box 961245 Fort Worth, TX 76161	apply.  Contingent			
Number, Street, City, State & Zip Code	<u> </u>			
, , , , , , , , , , , , , , , , , , , ,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sed	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and ano ☐ Check if this claim relates to a	— V.11.1.1.	250		
community debt	Other (including a right to offset)	ase		
Date debt was incurred	Last 4 digits of account number			
2.2 Credit Union One	Describe the property that secures the claim:	\$23,451.00	\$22,000.00	\$1,451.00
Creditor's Name	2009 Dodge Ram 2500 125000 miles			
400 E. Nine Mile Road	As of the date you file, the claim is: Check all that apply.			
Ferndale, MI 48220	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the daht? Observer	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or set	ourod		
Debtor 1 only	car loan)	curea		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and ano	_			
Check if this claim relates to a community debt	Other (including a right to offset)  Auto Loan			
community acti				
June 14	Last 4 digits of account number 0044			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	Christopher	William Roy	y Laney C		Case number (if know)		
	First Name	Middle Na	ame Last Name				
Debtor 2	,						
	First Name	Middle Na	ame Last Name				
23 1 7	iicken Loans c				\$122,996.00	\$140,000.00	\$17,004.00
Co	rporation Con	npan	Describe the property that secures		ψ122,990.00	φ140,000.00	Ψ17,004.00
Cre	ditor's Name		5931 Summerfield Road Pe	etersburg,			
			MI 49270 Monroe County				
_	600 Ann Arbor	Rd.	As of the date you file, the claim is	S: Check all that			
	st, Suite 201		apply.	or orion an anac			
Ply	mouth, MI 481	70-4675	☐ Contingent				
Nun	nber, Street, City, State	& Zip Code	☐ Unliquidated				
			☐ Disputed				
Who ow	es the debt? Chec	k one.	Nature of lien. Check all that apply	<b>'</b> .			
☐ Debto	r 1 only		☐ An agreement you made (such a	s mortgage or se	cured		
☐ Debto	r 2 only		car loan)				
Debto	r 1 and Debtor 2 on	ly	☐ Statutory lien (such as tax lien, m	nechanic's lien)			
☐ At leas	st one of the debtors	s and another	☐ Judgment lien from a lawsuit				
■ Check	c if this claim relate	es to a	Other (including a right to offset)	Mortgage			
comr	nunity debt						
Date deb	t was incurred		Last 4 digits of account nur	mber			
Add the	dollar value of ve	ur ontrine in C	olumn A on this page. Write that nu	mhar hara:	\$151,072.	00	
	•		the dollar value totals from all page		•		
	nat number here:	oa. rom, add	and domai value totals from all page	··	\$151,072.0	00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in	this information to identify your case:						
Debto	r 1 Christopher William Roy I	anev					
Dobto	- initial prior trimum recy	dle Name Last Name	<del>-</del>				
Debto							
(Spouse	if, filing) First Name Mid	dle Name Last Name	<b>;</b>				
United	States Bankruptcy Court for the: EASTE	RN DISTRICT OF MICHIGAN					
Case	number						
(if know					☐ Check	if this is an	
					amend	ed filing	
Offic	ial Form 106E/F						
	edule E/F: Creditors Who Ha	ve Unsecured Claim	e			12/15	
any exe Schedu Schedu left. Atta name a	omplete and accurate as possible. Use Part 1 for cutory contracts or unexpired leases that could le G: Executory Contracts and Unexpired Lease le D: Creditors Who Have Claims Secured by Prach the Continuation Page to this page. If you had case number (if known).	result in a claim. Also list executo s (Official Form 106G). Do not inclu operty. If more space is needed, co ave no information to report in a Pa	ry contract ide any cre py the Part	s on Schedule A/B: F ditors with partially s you need, fill it out,	roperty (Official For ecured claims that a number the entries in	m 106A/B) and are listed in a the boxes on	on
Part 1							
_	any creditors have priority unsecured claims at No. Go to Part 2.	gainst you?					
	Yes.						
ide po Pa	st all of your priority unsecured claims. If a credit entify what type of claim it is. If a claim has both prio ssible, list the claims in alphabetical order according rt 1. If more than one creditor holds a particular clai or an explanation of each type of claim, see the inst	rity and nonpriority amounts, list that on the creditor's name. If you have many, list the other creditors in Part 3.	claim here and an area than two	nd show both priority a	nd nonpriority amount	ts. As much as	
2.1	Nelnet	Last 4 digits of account number		\$76,106.50	\$76,106.50		0.00
	Priority Creditor's Name P.O. Box 82505 Lincoln, NE 68501-2505	When was the debt incurred?	7/20/201	16			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check a	II that apply			
V	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the	government			
ls	s the claim subject to offset?	☐ Claims for death or personal inj	ury while yo	u were intoxicated			
	No	Other. Specify					
	Yes	Student Lo	an				
Part 2	List All of Your NONPRIORITY Unsecu	red Claims					
3. Do	any creditors have nonpriority unsecured clain	ns against you?					
	No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.				
	Yes.						
un: tha	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c an one creditor holds a particular claim, list the other rt 2.	laim. For each claim listed, identify wh	nat type of cl	laim it is. Do not list cla	ims already included	in Part 1. If mor	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 17

Total claim

	Crystal Renee Laney	Case number (if know)	
4.1	Advance America Cash Advance	Last 4 digits of account number 2333	\$565.49
	Nonpriority Creditor's Name 1335 N. Telegraph Road Monroe, MI 48162	When was the debt incurred?	
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.2	Americollect Nonpriority Creditor's Name	Last 4 digits of account number 2500	\$91.00
	1851 S. Alverno Road Manitowoc, WI 54220	When was the debt incurred? 02/10/2016	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.3	ARS National Services Nonpriority Creditor's Name	Last 4 digits of account number 6757	\$1,085.23
	PO Box 469100 Escondido, CA 92046	When was the debt incurred?	
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Sears Credit Collection Account	

	1 Christopher William Roy Laney 2 Crystal Renee Laney		Case number (if know)	
4.4	Capital One Bank	Last 4 digits of account number	6820	\$2,753.00
	Nonpriority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	11/12/2014	
	Number Street City, 01 04130  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.5	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	2443	\$2,369.00
	PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	07/06/2002	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	Capital One Bank	Last 4 digits of account number	3798	\$1,828.00
	Nonpriority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	08/19/2002	
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card	purchases	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	or 1 Christopher William Roy Laney Crystal Renee Laney		Case number (if know)	
4.7	CBM Credit Services	Last 4 digits of account number	5066	\$86.00
	Nonpriority Creditor's Name 23 E. Front Street, STE 105 Monroe, MI 48161	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection	Account	
4.8	CitiCards CBNA	Last 4 digits of account number	6527	\$1,250.00
	Nonpriority Creditor's Name PO Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	03/12/2012	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	purchases	
4.9	Comenity Bank/Meijer	Last 4 digits of account number	2128	\$1,329.83
	Nonpriority Creditor's Name PO Box 182273	When was the debt incurred?	09/05/2014	
	Columbus, OH 43218	when was the dept incurred?	09/03/2014	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	■ Other. Specify Credit card	purchases	

ebtor 1 Christopher William Roy Laney Crystal Renee Laney	Case number (if know)	
Comenity Bank/Meijer	Last 4 digits of account number 1132	\$639.00
Nonpriority Creditor's Name PO Box 182273	When was the debt incurred? 03/24/2016	
Columbus, OH 43218  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you report as priority claims	u did not
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
1 Credit Adjustments Inc	Last 4 digits of account number 8316	\$95.73
Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you report as priority claims	u did not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills Collection Account	
Credit Adjustments Inc	Last 4 digits of account number 6609	\$397.75
Nonpriority Creditor's Name 330 Florence Street	When was the debt incurred?	
Defiance, OH 43512  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	u did not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify Medical Bills Collection Account	

Credit Adjustments Inc Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bills Collection Account  Last 4 digits of account number 7982  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Last 4 digits of account number 8457  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$18.38
330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Pyes  Credit Adjustments Inc Nopriority Creditor's Name 330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply	
As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Yes  Credit Adjustments Inc Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 6 and Debtor 2 only Debtor 6 and Debtor 2 only Debtor 6 and Debtor 2 only Debtor 7 and Debtor 2 only Debtor 7 and Debtor 2 only Debtor 8 and Debtor 9 only Debtor 9 and D	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 as eparation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Defiance, OH 43512 Number Street City State Zlp Code  Defiance, OH 43512 Number Street City State Zlp Code  Defiance, OH 43512 As of the date you file, the claim is: Check all that apply	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify ■ Other. Specify ■ Other. Specify ■ Medical Bills Collection Account  Last 4 digits of account number 330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code ■ Other Specify Incurred?  □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical Bills Collection Account ■ Medical Bills Collection Account ■ Medical Bills Collection Account ■ As of the date you file, the claim is: Check all that apply	
Type of NONPRIORITY unsecured claim:  Check if this claim is for a community debt Us the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Medical Bills Collection Account  Last 4 digits of account number  Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512  Number Street City State Zlp Code  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Whedical Bills Collection Account  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
Check if this claim is for a community debt Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bills Collection Account  Credit Adjustments Inc Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  When was the debt incurred?  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
Credit Adjustments Inc	
Is the claim subject to offset?  Is the claim subject to offset?  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce that you do not report as priority claims  In post of a separation agreement of divorce	
Credit Adjustments Inc Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512 Number Street City State Zlp Code  Medical Bills Collection Account  Medical Bills Collection Account  8457 When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
Credit Adjustments Inc  Nonpriority Creditor's Name 330 Florence Street Defiance, OH 43512  Number Street City State Zlp Code  Last 4 digits of account number When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
Nonpriority Credit Adjustments Inc  Nonpriority Creditor's Name  330 Florence Street  Defiance, OH 43512  Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply	
Nonpriority Creditor's Name  330 Florence Street  Defiance, OH 43512  Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply	\$110.02
Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply	
THIS INSURED AND MODEL OFFICE OFFICE	
☐ Debtor 1 only ☐ Contingent	
■ Debtor 2 only □ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Medical Bills Collection Account	
4.1 Credit Adjustments Inc Last 4 digits of account number 6609	\$493.48
Nonpriority Creditor's Name  330 Florence Street When was the debt incurred?	
Defiance, OH 43512  Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
☐ Debtor 1 only ☐ Contingent	
■ Debtor 2 only □ Unliquidated	
□ Debtor 1 and Debtor 2 only □ Disputed	
☐ At least one of the debtors and another  Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ■ Other. Specify Medical Bills Collection Account	

Discover	Last 4 digits of account number	6372	\$3,038.84
Nonpriority Creditor's Name PO Box 6103	When was the debt incurred?	06/14/2015	
Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim i		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit card	purchases	
Dundee Urgent Care	Last 4 digits of account number	7351	\$97.51
Nonpriority Creditor's Name  Dept #999316 PO Box 33730	When was the debt incurred?		
Detroit, MI 48232  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical Bill	<u>ls</u>	
Dundee Urgent Care	Last 4 digits of account number	6873	\$30.05
Nonpriority Creditor's Name  Dept #999316 PO Box 33730	When was the debt incurred?		
Detroit, MI 48232 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim?	3. Oneon all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical Bil	ls.	

Kohls	Last 4 digits of account number	2358	\$1,012.00
Nonpriority Creditor's Name  P.O. Box 2983	When was the debt incurred?	08/09/2014	
Milwaukee, WI 53201-2983	When was the dest mountain.	00/03/2014	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit card	purchases	
Kohls	Last 4 digits of account number	7894	\$829.00
Nonpriority Creditor's Name			*******
PO Box 3115	When was the debt incurred?	1/20/2015	
Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim?	3. Oncok all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	·	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	
Lakeland Health	Last 4 digits of account number	2025	\$104.52
Nonpriority Creditor's Name			• • •
Dept#771508 PO Box 77000	When was the debt incurred?		
Detroit, MI 48277  Number Street City State Zlp Code	As of the date you file, the claim i	s: Chack all that apply	
Who incurred the debt? Check one.	As of the date you file, the Claim I	o. Oneon all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
_	Student loans		
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	.a agreement of arreled that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Medical Bill	le.	

Lendmark	Last 4 digits of account number	9877	\$2,616.00
Nonpriority Creditor's Name 5305 Monroe Street, Suite 1 Toledo, OH 43623	When was the debt incurred?	11/22/2014	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify consumer I	oan	
Midland Credit Management	Last 4 digits of account number	2031	\$644.01
Nonpriority Creditor's Name 2365 Northside Drive, STE 300 San Diego, CA 92108	When was the debt incurred?		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Sears Cred	it Card Collection Account	
Monroe County Community Credit			44.000.00
Union Nonpriority Creditor's Name	Last 4 digits of account number	0901	\$1,278.00
14 Winchester	When was the debt incurred?		
Monroe, MI 48161			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	purchases	

Debtor 1 Christopher William Roy Laney Crystal Renee Laney			Case number (if know)	
4.2 5	Nationwide Credit Inc	Last 4 digits of account number	8329	\$98.70
	Nonpriority Creditor's Name PO Box 14581	When was the debt incurred?		
	Des Moines, IA 50306	when was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify QVC Collect	ction Account	
4.2 6	NES	Last 4 digits of account number	0006	\$6,430.21
	Nonpriority Creditor's Name 2479 Edison Blvd, Unit A Twinsburg, OH 44087-2340	When was the debt incurred?	4/13/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	purchases	
4.2 7	Promedica	Last 4 digits of account number	3813	\$385.04
	Nonpriority Creditor's Name			
	PO Box 14000	When was the debt incurred?		
	Belfast, ME 04915  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,	on one an anatappiy	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Bil	Is	
	<del></del>	- Onler. Opeoliy		

r 1 Christopher William Roy Laney Crystal Renee Laney	Case number (if know)	
Promedica	Last 4 digits of account number 5271	\$2,435.89
Nonpriority Creditor's Name PO Box 740052	When was the debt incurred?	
Cincinnati, OH 45274  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
Promedica	Last 4 digits of account number 7449	\$1,174.46
Nonpriority Creditor's Name PO Box 740052	When was the debt incurred?	<b>, , , , , , , , , , , , , , , , , , , </b>
Cincinnati, OH 45274  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills	
Receivables Outsourcing, LLC	Last 4 digits of account number 1377	\$1,515.00
Nonpriority Creditor's Name 1920 Greenspring Drive, STE 200 Lutherville Timonium, MD 21093	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills Collection Account	

Debtor 1 Christopher William Roy Laney Debtor 2 Crystal Renee Laney			Case number (if know)	
1.3 I	Source Receivables Management	Last 4 digits of account number	7049	\$350.50
	Nonpriority Creditor's Name PO Box 4068	When was the debt incurred?		
	Greensboro, NC 27404	when was the dept incurred?		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Collection	Account	
.3	State Farm Bank	Last 4 digits of account number	6521	\$2,438.00
	Nonpriority Creditor's Name			Ψ=,::::::
	3 State Farm Plaza N-3 Bloomington, IL 61791	When was the debt incurred?	09/22/2014	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Credit card	purchases	
.3	SYNCB/Lowes	Last 4 digits of account number	3333	\$340.00
	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.0.00
	PO Box 965005	When was the debt incurred?	05/13/2015	
	Orlando, FL 32896	As of the data was file the elector	: OL	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	O continuent		
	■ Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	a Jann.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	

ebtor 1 Christopher William Roy Laney Crystal Renee Laney		Case number (if know)		
3 SYNCB/Sams	Last 4 digits of account number	3410	\$1,551.00	
Nonpriority Creditor's Name PO Box 965005	When was the debt incurred?	04/12/2015		
Orlando, FL 32896-5005  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	Other. Specify Credit card	Other. Specify Credit card purchases		
3 SYNCB/Sams	Last 4 digits of account number	0550	\$572.00	
Nonpriority Creditor's Name PO Box 965005	When was the debt incurred?	05/15/2016		
Orlando, FL 32896-5005  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts		
Yes	Other. Specify Credit card	purchases		
3 SYNCB/Value City Furniture	Last 4 digits of account number	0637	\$2.533.00	
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred?	02/09/2014	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply		
Who incurred the debt? Check one.	As of the date you me, the claim	oneck all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
■ No	Debts to pension or profit-sharing			
☐ Yes	■ Other. Specify Credit card purchases			

otor 1 Christopher William Roy Laney Crystal Renee Laney		Case number (if know)		
TD Bank USA/Target Credit	Last 4 digits of account number	0191	\$1,075.00	
Nonpriority Creditor's Name PO Box 673	When was the debt incurred?	09/03/2015		
Minneapolis, MN 55440	mon was the assembarrea.	03/03/2013		
Number Street City State ZIp Code	As of the date you file, the claim	e, the claim is: Check all that apply		
Who incurred the debt? Check one.	_			
Debtor 1 only	Contingent			
Debtor 2 only	Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured			
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
■ No	Debts to pension or profit-sharing	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Credit card	purchases		
Tractor Supply/CBNA	Last 4 digits of account number	3347	\$2,473.00	
Nonpriority Creditor's Name	_	<del></del>	<del>-</del>	
PO Box 6497	When was the debt incurred?	12/31/2014		
Sioux Falls, SD 57117-6497  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.		er chook an anat appry		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims			
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Credit card	purchases		
Universal Credit Services	Last 4 digits of account number	1644	\$103.81	
Nonpriority Creditor's Name	_			
PO Box 158	When was the debt incurred?			
Hartland, MI 48353  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.		or chook an inat appry		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts		
☐ Yes	Other Specify Collection			

	rld's Foremost Bank	Last 4 digits of account number	4904	\$5,374.0	
480	oriority Creditor's Name 10 NW First, STE 300 coln, NE 68521	When was the debt incurred?	02/24/2014		
	ber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who	incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
ПА	at least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
debt	: e claim subject to offset?	☐ Obligations arising out of a separe properties of a separe properties.	aration agreement or divorce that you did not		
■ N	•	Debts to pension or profit-shari	ng plans, and other similar debts		
		■ Other. Specify Credit card			
<u></u>	<u> </u>	Other. Specify Oredit care	purchases		
	rld's Foremost Bank	Last 4 digits of account number	0041	\$2,311.0	
480	oriority Creditor's Name 10 NW First, STE 300 coln, NE 68521	When was the debt incurred?	11/01/2015		
	ber Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
Who	incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
ПА	at least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
debt	e claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not		
■ N	<u>-</u>	Debts to pension or profit-shari	ng plans, and other similar debts		
ЦΥ	es	Other. Specify Credit card	purchases		
nis pag	collect from you for a debt you owe to so than one creditor for any of the debts that any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that one one else, list the original creditor in at you listed in Parts 1 or 2, list the add or submit this page.	you already listed in Parts 1 or 2. For example, if n Parts 1 or 2, then list the collection agency here itional creditors here. If you do not have addition	. Similarly, if you	
d for	uicoo	On which entry in Part 1 or Part 2 did you	ulist the original creditor?		
d for nd Ade dica	a	· · · - · · · · · · · · · · · · ·	ulist the original creditor? Part 1: Creditors with Priority Unsecured Claims		
d for nd Ade dica x 14	a 4000	Line 4.30 of (Check one):	_	s	
ed for nd Ade edica ox 14	a	Line 4.30 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	s	
ed for nd Add edica ex 14 et, Mi	a 1000 E 04915 dress	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  List the original creditor?	s	
ed for nd Addedica ox 14 st, Mi	a 1000 E 04915 dress a	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  I list the original creditor? Part 1: Creditors with Priority Unsecured Claims		
ed for and Addedica ex 14 t, Miland Addedica ex 14	a 1000 E 04915 dress a 1000	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  List the original creditor?		
ed for nd Addedica ox 14 st, Mind Addedica ox 14	a 1000 E 04915 dress a	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  I list the original creditor? Part 1: Creditors with Priority Unsecured Claims		
ed for and Addica ex 14 and Addica ex 14 t, Mi	dress a 1000 E 04915 dress a 1000 E 04915	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim		
ed for nd Addedica ox 14 st, Mi nd Addedica ox 14 st, Mi	dress a dress dress a	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  list the original creditor? Part 1: Creditors with Priority Unsecured Claims	s	
ed for and Addica ex 14 at, Mil and Addica ex 14 and Addica ex 14	dress a 4000 dress	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim	s	
ed for nd Addica ex 14 et, Mind Addica ex 14 edica ex 14 edica ex 14	dress a dress dress a	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  list the original creditor? Part 1: Creditors with Priority Unsecured Claims	s	
d for and Add edica ex 14t, Mil and Addica edica ex 14t, Mil and Addica tx 14t, Mil and Addica edica ex 14t, Mil	dress a 4000 E 04915 dress	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  I list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  I list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	s	
ed for nd Add edica ox 14 st, Mi and Add edica ox 14 st, Mi	a 1000 E 04915 dress a 1000 E 04915	Line 4.30 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  I list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim  I list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	s	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 2 Crystal Renee Laney		Case nu	umber (if know)
Belfast, ME 04915	Last 4 digits of account number		
Name and Address Promedica PO Box 14000 Belfast, ME 04915	On which entry in Part 1 or Part 2 did y Line 4.14 of (Check one):	☐ Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number		
Name and Address Promedica PO Box 14000 Belfast, ME 04915	On which entry in Part 1 or Part 2 did y Line 4.15 of (Check one):  Last 4 digits of account number	☐ Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
Name and Address QVC 1200 Wilson Drive at Studio Park West Chester, PA 19380	On which entry in Part 1 or Part 2 did y Line 4.25 of (Check one):  Last 4 digits of account number	Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
Name and Address Roosen, Varchetti & Oliver, PLLC PO Box 2305 Mount Clemens, MI 48046	On which entry in Part 1 or Part 2 did y Line 4.40 of (Check one):  Last 4 digits of account number	☐ Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
Name and Address Sears 3333 Beverly Road Hoffman Estates, IL 60179	On which entry in Part 1 or Part 2 did y Line 4.23 of (Check one):  Last 4 digits of account number	☐ Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
Name and Address Sears 3333 Beverly Road Hoffman Estates, IL 60179	On which entry in Part 1 or Part 2 did y Line 4.3 of (Check one):  Last 4 digits of account number	☐ Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
Name and Address SYNCB/Husqvarna C/O PO Box 965036 Orlando, FL 32896-5036	On which entry in Part 1 or Part 2 did y Line 4.26 of (Check one):  Last 4 digits of account number	☐ Part 1: C	riginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims
Part 4: Add the Amounts for Each Type of 6. Total the amounts of certain types of unsecured c type of unsecured claim.	Unsecured Claim	al reporting p	purposes only. 28 U.S.C. §159. Add the amounts for each
6a. Domestic support obligation	ons	6a.	Total Claim \$ 0.00

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 76,106.50
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 76,106.50
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 53,922.45

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1	Christopher	William	Roy	Laney
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Debtor 2 Crystal Renee Laney

Case number (if know)

Total Nonpriority. Add lines 6f through 6i.

6j. 53,922.45

☐ Check if this is an amended filing
Γ

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

**Chrysler Capital** PO Box 961245 Fort Worth, TX 76161 **Auto Lease** 

Fill in th	is inform	ation to identify your	case:			
Debtor 1		Christopher Willi	am Roy Laney			
		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Crystal Renee La	Middle Name	Last Name		
(Spouse II,	illing)	i iist ivaille				
United S	States Ban	kruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
Case nu	mber					
(if known)						☐ Check if this is an
						amended filing
Ott: ~:	al Fa#	40CLL				
		m 106H				
Sche	dule	H: Your Cod	ebtors			12/15
□ N ■ Y  2. W Arizo	lo  /ithin the ona, Califo  lo. Go to li	l <b>ast 8 years, have yo</b> rnia, Idaho, Louisiana ne 3.	u <b>lived in a community  </b> , Nevada, New Mexico, F	uerto Rico, Texas, Washing	(Community propert	y states and territories include
	·	, ,	use, or legal equivalent li	•		
in liı Forr	ne 2 agair	n as a codebtor only Schedule E/F (Officia	if that person is a guara	ntor or cosigner. Make su	re you have listed th	g with you. List the person shown ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to fil
		1: Your codebtor nber, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt s that apply:
3.1	N/A				☐ Schedule D, li☐ Schedule E/F,☐ Schedule G	line

Fill in this information t	o identify your case:	
Debtor 1	Christopher William Roy Laney	
Debtor 2 (Spouse, if filing)	Crystal Renee Laney	
United States Bankrup	tcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapter
Official Form	106I	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Lineman/Substation Tech Nursing Assistant** Include part-time, seasonal, or self-employed work. Newkirk Electric Associates, Kathleen Rhienhardt Medical Employer's name Group Occupation may include student or homemaker, if it applies. **Employer's address** 1875 Roberts Street 14930 Laplaisance Rd Ste 127 Muskegon, MI 49442 Monroe, MI 48161 How long employed there? 3

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

					non-	filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	4,411.40	\$	1,540.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	4,411.40	\$	1,540.00

Debtor 1 Christopher William Roy Laney
Crystal Renee Laney

Case number (if known)

					Fo	r Debtor 1			or Debtor		
	Copy	y line 4 here	4.		\$	4,411	.40	\$		,540.00	)
5.	List a	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58		\$_		2.81	\$		169.67	
	5b.	Mandatory contributions for retirement plans	5k		\$_		0.00	\$	·	0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$_		0.00	\$	<u> </u>	0.00	_
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$	<u> </u>	0.00	
	5e.	Insurance	56		\$_		0.00	\$	<u> </u>	0.00	_
	5f.	Domestic support obligations	5f		\$_		0.00	\$		0.00	_
	5g.	Union dues	5g	-	\$_		3.34			0.00	
_	5h.	Other deductions. Specify:	_	Դ.+	· –			+ \$		0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,129		\$	-	169.67	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,282	2.25	\$	1	,370.33	<u> </u>
8.	List a 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$_		0.00	\$		0.00	_
	8b.	Interest and dividends	8k	Э.	\$_	(	0.00	\$	'	0.00	<u>)                                    </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	80	С.	\$	(	0.00	\$	;	0.00	)
	8d.	Unemployment compensation	80	d.	\$	(	0.00	\$	·	0.00	)
	8e.	Social Security	86	Э.	\$	(	0.00	\$		0.00	)
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f		\$_		0.00	\$		0.00	_
	8g.	Pension or retirement income	80		\$_		0.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8r _	Դ.+	\$_	(	0.00	+ \$		0.00	<u>)                                    </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(	0.00	\$	i	0.0	00
10	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$		3,282.25	+ \$		1,370.33	= \$	4,652.58
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		3,202.23	-   Γ		1,370.33		4,032.30
	State Include other Do not Spec	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a cify:	depo	labl	e to	pay expens	es list	ed i	n <i>Schedule</i> 11.	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaines								\$	4,652.58
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?							Combi month	ined ly income
		Yes. Explain: Debtor 1's income may fluctuate downward if the significant weather events)	we	eatl	her	is poor (h	eavy	rai	n, winds,	or oth	ier

Fill	in this informa	tion to identify yo	ur case:									
Debtor 1 Christopher William Roy Laney						Check if this is:						
Debtor 2 Crystal Renee Laney								An amended filing	ving postpetition chapter			
	ouse, if filing)	Crystal Rene	e Laney					is supplement snow				
Unite	ed States Bankr	ruptcy Court for the:	EASTE	RN DISTRICT OF MICH	IGAN		_	MM / DD / YYYY				
		.,										
1	e number nown)											
Of	fficial Fo	rm 106J										
Sc	chedule	J: Your E	Exper	ises					12/15			
Be a	as complete a ormation. If m nber (if know	and accurate as ore space is nee n). Answer ever	possible eded, atta y questio	. If two married people and the control of the cont								
Part 1.	Is this a joir	ibe Your House	hold									
••	□ No. Go to											
		s Debtor 2 live i	n a separ	ate household?								
	■ N		•									
	_ ``	_	t file Offic	al Form 106J-2, <i>Expense</i>	es for Separate House	hold of D	ebto	or 2.				
2.	Do you have	e dependents?	□ No									
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?			
	Do not state	the							□ No			
	dependents				Daughter			4 months	Yes			
								_	□ No			
					Daughter			3	Yes			
									□ No			
									☐ Yes ☐ No			
									☐ Yes			
3.	expenses of	penses include f people other th d your depender	nan $_{\square}$	No Yes					55			
exp	imate your ex	ate Your Ongoir openses as of your date after the b	ur bankr	uptcy filing date unless	you are using this fo pplemental Schedule	orm as a J, check	sup the	oplement in a Cha e box at the top of	pter 13 case to report f the form and fill in the			
the		n assistance and		government assistance cluded it on <i>Schedule I</i> :				Your expe	enses			
4.		or home owners! and any rent for the		uses for your residence.	. Include first mortgage	e 4.	\$		884.00			
		led in line 4:	J :									
							_					
		estate taxes	or ronto	'e incurance		4a. 4b.			0.00			
		rty, homeowner's maintenance, re		upkeep expenses		40. 4c.			0.00 180.00			
		owner's associati				4d.			0.00			
5.	Additional r	mortgage payme	ents for ye	<b>our residence,</b> such as h	nome equity loans	5.	\$		0.00			

Schedule J: Your Expenses 17-49379-mbm Doc 1 Filed 06/23/17 Entered 06/23/17 17:32:12 Page 43 of 66 Official Form 106J

6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	260.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies		\$	820.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	250.00
10.	Personal care products and services	10.	\$	60.00
11.	Medical and dental expenses	11.	\$	20.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	480.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.		10.00
	Charitable contributions and religious donations	14.		0.00
	Insurance.		<u> </u>	0.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	250.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.	_		
	Specify:	16.	\$	0.00
17.	Installment or lease payments:		_	
	17a. Car payments for Vehicle 1	17a.	·	516.00
	17b. Car payments for Vehicle 2	17b.	·	369.00
	17c. Other. Specify:	17c.		0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sched			
	20a. Mortgages on other property	20a.	*	0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
0.4	20e. Homeowner's association or condominium dues	20e.		0.00
21.	Other: Specify:	21.	+5	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,299.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	·
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,299.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,652.58
	23b. Copy your monthly expenses from line 22c above.	23b.	·	4,299.00
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	353.58
	The result is your <i>monthly net income</i> .	_00.		

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

	N	J۸
_	יו	WU.

☐ Yes.

Explain here: Dependent on the weather conditions Debtor 1's income may fluctuate downward slightly.

Schedule J: Your Expenses Official Form 106J page 2

=				
Fill in this i	nformation to identify your	case:		
Debtor 1	Christopher Willi			
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Crystal Renee La	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN	
Case numbe	er			
(if known)				☐ Check if this is an
				amended filing
Official F	Form 106Dec			
Declai	ration About a	ın Individua	I Debtor's Schedu	iles 12/15
	th. 18 U.S.C. §§ 152, 1341, 1			to \$250,000, or imprisonment for up to 20
Did yo	u pay or agree to pay some	one who is NOT an atto	orney to help you fill out bankruptcy	/ forms?
■ N	О			
□ Ye	es. Name of person			Attach Bankruptcy Petition Preparer's Notice,
_	•			Declaration, and Signature (Official Form 119)
	penalty of perjury, I declare	that I have read the sur	mmary and schedules filed with this	s declaration and
V 1.1	OL TAKE IN MARKET OF THE	•	Y // 0 // 12	
	Christopher William Ro ristopher William Roy L		X /s/ Crystal Renee La Crystal Renee Lane	
	nature of Debtor 1	alley	Signature of Debtor 2	<sup>ş</sup> y
0.9	,		2.9 2. 202.0. 2	
Dat	te <b>June 23, 2017</b>		Date June 23, 201	7

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill in	this informat	ion to identify your	case:			
Debto		Christopher Will	iam Roy Laney  Middle Name	Look Name		
Debto		Crystal Renee La		Last Name		
		First Name	Middle Name	Last Name		
Unite	d States Bankr	uptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case	number					
(if know	/n)					Check if this is an
						amended filing
Off;	cial Earn	2 107				
	cial Forn		Affairs for Individ	luale Filing for B	ankruntev	4/16
inform	nation. If more	e space is needed,	attach a separate sheet to		equally responsible for sup y additional pages, write yo	
numb	er (if known).	Answer every ques	stion.			
Part 1	Give Deta	ails About Your Ma	rital Status and Where You	Lived Before		
1. V	Vhat is your cu	urrent marital statu	s?			
	Married					
_	_	d				
2. D	ouring the last	3 vears, have you	lived anywhere other than	where you live now?		
_	_	o you. o,o you				
		I of the places you li	ved in the last 3 years. Do no	at include where you live now	,	
			•	,		
'	Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
ı	N/A		From-To:	Same as Debtor	1	Same as Debtor 1
						From-To:
states	<ul><li>and territories</li><li>No</li><li>Yes. Make</li><li>Explain t</li></ul>	sure you fill out Sch	nedule H: Your Codebtors (Of	vada, New Mexico, Puerto R	ity property state or territorico, Texas, Washington and \	Visconsin.)
F	ill in the total a	mount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part		endar years?
	No No					
	Yes. Fill in	the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		current year until or bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,703.00	■ Wages, commissions, bonuses, tips	\$7,984.00
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 1

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

attorney for this bankruptcy case.

Creditor's Name and Address  Quicken Loans c/o The Corporation Compan 40600 Ann Arbor Rd. East, Suite 201 Plymouth, MI 48170-4675  Credit Union One 400 E. Nine Mile Road Ferndale, MI 48220  Chrysler Capital PO Box 961245 Fort Worth, TX 76161	April 2017, May 2017, and June 2017  April 2017, May 2017 and June 2017  April 2017, May 2017, and June 2017	Total amount paid \$2,652.00 \$1,548.00 \$1,107.00	Amount you still owe \$122,996.00 \$23,000.00	Was this payment for  ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other □ Mortgage ■ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other □ Mortgage
Corporation Compan 40600 Ann Arbor Rd. East, Suite 201 Plymouth, MI 48170-4675  Credit Union One 400 E. Nine Mile Road Ferndale, MI 48220  Chrysler Capital PO Box 961245	2017, and June 2017 April 2017, May 2017 and June 2017 April 2017, May 2017, and June	\$1,548.00	\$23,000.00	☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
400 E. Nine Mile Road Ferndale, MI 48220 Chrysler Capital PO Box 961245	2017 and June 2017 April 2017, May 2017, and June	·		□ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
PO Box 961245	2017, and June	\$1,107.00	Unknown	☐ Mortgage
				☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Vehicle Lease
Within 1 year before you filed for bankruptc Insiders include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.  No Yes. List all payments to an insider.	thers; relatives of any gecontrol, or owner of 20% U.S.C. § 101. Include p	eneral partners; partne or more of their votin ayments for domestic	erships of which yo g securities; and ar support obligation	ou are a general partner; corporations ny managing agent, including one for is, such as child support and
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
N/A N/A		\$0.00	\$0.00	
Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosic  No Yes. List all payments to an insider				ccount of a debt that benefited an
Insider's Name and Address	Dates of payment	Total amount paid \$0.00	Amount you still owe \$0.00	Reason for this payment Include creditor's name

Official Form 107

7.

8.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	otor 2 Crystal Renee Laney		Case number	if known)			
	Case title Case number	Nature of the case	Court or agency	Status of th	e case		
	World's Foremost Bank vs. Christopher W. Laney 17-C-1544-GC	Collection	Monroe First District Co 106 E. First Street Monroe, MI 48161	Pending On appe Conclude			
10.	Within 1 year before you filed for bankrupton Check all that apply and fill in the details below.		erty repossessed, foreclosed	, garnished, attached	l, seized, or levied?		
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>						
	Creditor Name and Address	Describe the Property		Date	Value of the property		
	N//4	Explain what happened					
	N/A	_			\$0.00		
		☐ Property was foreclos	☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished.				
		☐ Property was attache	d, seized or levied.				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.  Creditor Name and Address			Date action was	mounts from your  Amount		
	N/A			taken	\$0.00		
		Last 4 digits of account r	number:				
12.	Within 1 year before you filed for bankruptcourt-appointed receiver, a custodian, or a  No Yes  List Certain Gifts and Contributions		erty in the possession of an a	ssignee for the bene	fit of creditors, a		
13.	Within 2 years before you filed for bankrup  ☐ No  ☐ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value of more th	nan \$600 per person?	•		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
	N/A				\$0.00		
	Person's relationship to you:						
14.	Within 2 years before you filed for bankrup  No		s or contributions with a tota	I value of more than	\$600 to any charity?		
	Yes. Fill in the details for each gift or con Gifts or contributions to charities that tot		ı contributed	Dates you	Value		
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			contributed			
Offici	ial Form 107 Stater	nent of Financial Affairs for I	ndividuals Filing for Bankruptcy		page 4		

Best Case Bankruptcy

Debt Debt	tor 1 tor 2	Christopher William Roy Lane Crystal Renee Laney	y	Case num	nber (if known)	
	more Char	or contributions to charities that the than \$600 ity's Name ess (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value \$0.00
	IN/A					<b>\$0.00</b>
Part	6:	List Certain Losses				
		n 1 year before you filed for bankru mbling?	ptcy or	since you filed for bankruptcy, did you lose	anything because of the	eft, fire, other disaster,
		No 'es. Fill in the details.				
		ribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pendi nce claims on line 33 of Schedule A/B: Property.		Value of property lost
	N/A		Ilisura	nce claims on line 33 or <i>Schedule Arb. Troperty.</i>		\$0.00
	lnclud  N Perso Addr Emai Perso Lenr 222 Mon	ulted about seeking bankruptcy or e any attorneys, bankruptcy petition policy of the control of	prepari prepare	id you or anyone else acting on your behalf ping a bankruptcy petition? rs, or credit counseling agencies for services req  Description and value of any property transferred  Attorney Fees		Amount of payment \$1,165.00
	222	nard Graham & Goldsmith, PLC Washington Street roe, MI 48161	;	335.00 Filing Fee for Bankruptcy Petition held in Escrow by Lennard Graham & Goldsmith, PLC	June 6, 2017	\$335.00
	promi Do no		ditors o	id you or anyone else acting on your behalf por to make payments to your creditors? ted on line 16.	oay or transfer any propo	erty to anyone who
	Perso Addr	on Who Was Paid ess		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	N/A					\$0.00

	Debtor 1 Christopher William Roy Laney Debtor 2 Crystal Renee Laney			Case number (if known)			
trans Includinclud	in 2 years before you filed for bankrup sferred in the ordinary course of your de both outright transfers and transfers r de gifts and transfers that you have alrea No Yes. Fill in the details.	business or financial af made as security (such as	ffairs? s the granting of a sec				
Pers	son Who Received Transfer Iress	Description and property transfe		Describe any property or payments received or debts paid in exchange	Date transfer was made		
Pers	son's relationship to you			paid in exchange			
N/A							
bene □ ■	in 10 years before you filed for bankru ficiary? (These are often called asset-p No Yes. Fill in the details. ne of trust	rotection devices.)	any property to a sel		e of which you are a  Date Transfer was		
N/A		N/A			made		
Part 8:	List of Certain Financial Accounts, I		·				
20. With sold, Inclu	List of Certain Financial Accounts, I in 1 year before you filed for bankrupt , moved, or transferred? ide checking, savings, money market, ses, pension funds, cooperatives, ass No	tcy, were any financial a	accounts or instrume	ents held in your name, or for			
20. With sold, Inclu	in 1 year before you filed for bankrup , moved, or transferred? Ide checking, savings, money market, ses, pension funds, cooperatives, ass	tcy, were any financial a	accounts or instrume	ents held in your name, or for			
20. With sold, Inclu hous	in 1 year before you filed for bankrup , moved, or transferred? de checking, savings, money market, ses, pension funds, cooperatives, ass No Yes. Fill in the details. ne of Financial Institution and lress (Number, Street, City, State and ZIP	tcy, were any financial a	accounts or instrume	ents held in your name, or for deposit; shares in banks, cre	dit unions, brokerage  Last balance		
20. With sold, Inclu hous	in 1 year before you filed for bankrups, moved, or transferred? Ide checking, savings, money market, ses, pension funds, cooperatives, ass No Yes. Fill in the details. The of Financial Institution and Iress (Number, Street, City, State and ZIP)	tcy, were any financial a , or other financial acco ociations, and other fina Last 4 digits of	unts; certificates of ancial institutions.  Type of account	ents held in your name, or for deposit; shares in banks, cre- or Date account was closed, sold, moved, or transferred	dit unions, brokerage  Last balance before closing or		
20. With sold, Inclu hous IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	in 1 year before you filed for bankrupi, moved, or transferred? Ide checking, savings, money market, ses, pension funds, cooperatives, ass No Yes. Fill in the details. The of Financial Institution and Iress (Number, Street, City, State and ZIP)  Ou now have, or did you have within to, or other valuables?  No Yes. Fill in the details.	Last 4 digits of account number  XXXX-	Type of account instrument  Checking Savings Money Market Brokerage Other Other	ents held in your name, or for deposit; shares in banks, creor or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer \$0.00		
20. With sold, Inclusion house Inclusion Nam Add Code N/A	in 1 year before you filed for bankrups, moved, or transferred? Ide checking, savings, money market, ses, pension funds, cooperatives, ass No Yes. Fill in the details. The of Financial Institution and Iress (Number, Street, City, State and ZIP)  Ou now have, or did you have within and or other valuables?	tcy, were any financial according according according according according according account number	Type of account instrument  Checking Savings Money Market Brokerage Other Other	ents held in your name, or for deposit; shares in banks, creor  Or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		

N/A

Official Form 107

Name of site

No

Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Governmental unit

ZIP Code)

N/A

Address (Number, Street, City, State and

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

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Date of notice

know it

Environmental law, if you

	otor 1 otor 2	Christopher William Roy La Crystal Renee Laney	ney			Cas	se number (if known)	
26.	Have	e you been a party in any judicial (	or administrat	tive proce	eeding under any e	nvironn	nental law? Include settlements a	nd orders.
		No Yes. Fill in the details.						
		se Title se Number		ourt or aç	gency	Nat	ture of the case	Status of the case
				ddress (Nate and ZIP	umber, Street, City, Code)			
	N/A							☐ Pending ☐ On appeal ☐ Concluded
Pai	t 11:	Give Details About Your Busine	ss or Connec	tions to A	Any Business			
27.	27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. G		lotaile bo	low for each busin	055		
	Yes. Check all that apply above and fill Business Name Address (Number, Street, City, State and ZIP Code)		Descri	Describe the nature of the business  Name of accountant or bookkeeper		SS	Employer Identification number Do not include Social Security number or ITIN.	
	N/A	<b>\</b>					EIN: From-To	
28.		nin 2 years before you filed for bar tutions, creditors, or other parties		you give	a financial stateme	nt to an	yone about your business? Inclu	de all financial
		No Yes. Fill in the details below.						
		dress nber, Street, City, State and ZIP Code)	Date Is	ssued				
Pai	t 12:	Sign Below						
I ha	I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.							
Ch	risto	stopher William Roy Laney pher William Roy Laney re of Debtor 1		Crysta	stal Renee Lane Il Renee Laney ure of Debtor 2	y		
Dat	e J	une 23, 2017		Date	June 23, 2017			
<b>I</b>	10	attach additional pages to <i>Your St</i>	atement of Fi	nancial A	ffairs for Individua	ls Filing	g for Bankruptcy (Official Form 10	7)?
Offic		m 107	Statement of Fir	nancial Aff	airs for Individuals Fi	ling for E	Bankruptcy	page 8

	Christopher William Roy Laney Crystal Renee Laney	Case number (if known)			
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?					

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# United States Bankruptcy Court Eastern District of Michigan

In re		opher William I Renee Lane			Case	No.	
	0.70.0		,	Debtor(s)	Chapt	ter <b>7</b>	
				F ATTORNEY FOR I			
	The und	lersigned, nursu	ant to F.R.Bankr.P. 2016(b), stat		2010(b)		
1.			attorney for the Debtor(s) in this				
2.		-	or agreed to be paid by the Debt		l is: [Check one]		
	[ <b>X</b> ]	FLAT FEE		.,	,		
	A.		vices rendered in contemplation				
	_		the filing fee paid			1,165.00	_
	B.		g this statement, received			1,165.00	_
	C.	RETAINER	palance due and payable is			0.00	<u>)                                    </u>
	[ ] A.		etainer received				
							_
	В.		gned shall bill against the retaine y all Court approved fees and ex				schedule.] Debtor(s) have
3.	\$ <u>335</u>	<b>5.00</b> of the fil	ling fee has been paid.				
4.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]						
	A.	Analysis of the bankruptcy;	ne debtor's financial situation, an	d rendering advice to th	e debtor in determin	ing whether t	to file a petition in
	B. C.		nd filing of any petition, schedul on of the debtor at the meeting of				earings thereof;
	<del>D.</del> —— E.	Representation Reaffirmation	on of the debtor in adversary process.	eeedings and other conto	ested bankruptey ma	tters;	
	F.	Redemptions					
	G.	Other:	s with secured creditors to	roduce to market va	dua: avamption n	Jannina: nr	congration and filing of
		reaffirmatio	on agreements and applicati for avoidance of liens on h	ions as needed; prep			
5.	By agre		debtor(s), the above-disclosed fe				P. C.C.
			tion of the debtors in any d any other adversary proceed		ons, judiciai ilen a	voidances,	relief from stay
6.	The sou		s to the undersigned was from:	J			
	A.	XX	Debtor(s)' earnings, wages,		ces performed		
_	В.	<del></del>	Other (describe, including t				
7.			ot shared or agreed to share, with ensation paid or to be paid except		than with members	of the unders	signed's law firm or
Dated:	June	23, 2017			/s/ Jahn F. Land		
					Attorney for the Do	ebtor(s)	
					Lennard Grahan		nith PLC
					222 Washington Monroe, MI 4816		
					734-242-9500	/1-214U	
Agreed:	/e/ (°I	hristonher Wi	Iliam Roy Laney		/s/ Crystal Rene	e I anev	
rigiceu.			m Roy Laney		Crystal Renee L		
	Debto	•			Debtor	-	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

#### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

#### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# United States Bankruptcy Court Eastern District of Michigan

In re	Crystal Renee Laney		Case No.	
		Debtor(s)	Chapter	7
	VERIFICA	TION OF CREDITOR MA	ATRIX	
The abo	ove-named Debtors hereby verify that the att	tached list of creditors is true and correct	et to the best	of their knowledge.
Date:	June 23, 2017	/s/ Christopher William Roy Laney		
		Christopher William Roy Laney		
		Signature of Debtor		
Date:	June 23, 2017	/s/ Crystal Renee Laney		
		Crystal Renee Laney		
		Signature of Debtor		

Advance America Cash Advance 1335 N. Telegraph Road Monroe, MI 48162

Americollect 1851 S. Alverno Road Manitowoc, WI 54220

ARS National Services PO Box 469100 Escondido, CA 92046

Capital One Bank PO Box 30281 Salt Lake City, UT 84130

Capital One Bank PO Box 30281 Salt Lake City, UT 84130

Capital One Bank PO Box 30281 Salt Lake City, UT 84130

CBM Credit Services 23 E. Front Street, STE 105 Monroe, MI 48161

Chrysler Capital PO Box 961245 Fort Worth, TX 76161

Chrysler Capital PO Box 961245 Fort Worth, TX 76161

CitiCards CBNA PO Box 6241 Sioux Falls, SD 57117

Comenity Bank/Meijer PO Box 182273 Columbus, OH 43218

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Credit Adjustments Inc 330 Florence Street Defiance, OH 43512

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Credit Union One 400 E. Nine Mile Road Ferndale, MI 48220

Discover PO Box 6103 Carol Stream, IL 60197

Dundee Urgent Care Dept #999316 PO Box 33730 Detroit, MI 48232

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Kohls P.O. Box 2983 Milwaukee, WI 53201-2983 Kohls PO Box 3115 Milwaukee, WI 53201

Lakeland Health
Dept#771508 PO Box 77000
Detroit, MI 48277

Lendmark 5305 Monroe Street, Suite 1 Toledo, OH 43623

Midland Credit Management 2365 Northside Drive, STE 300 San Diego, CA 92108

Monroe County Community Credit Union 14 Winchester Monroe, MI 48161

N/A

Nationwide Credit Inc PO Box 14581 Des Moines, IA 50306

Nelnet P.O. Box 82505 Lincoln, NE 68501-2505

NES 2479 Edison Blvd, Unit A Twinsburg, OH 44087-2340

Promedica PO Box 14000 Belfast, ME 04915

Promedica PO Box 740052 Cincinnati, OH 45274 Promedica PO Box 740052 Cincinnati, OH 45274

Promedica PO Box 14000 Belfast, ME 04915

Quicken Loans c/o The Corporation Compan 40600 Ann Arbor Rd. East, Suite 201 Plymouth, MI 48170-4675

QVC 1200 Wilson Drive at Studio Park West Chester, PA 19380

Receivables Outsourcing, LLC 1920 Greenspring Drive, STE 200 Lutherville Timonium, MD 21093

Roosen, Varchetti & Oliver, PLLC PO Box 2305 Mount Clemens, MI 48046 Sears 3333 Beverly Road Hoffman Estates, IL 60179

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Source Receivables Management PO Box 4068 Greensboro, NC 27404

State Farm Bank 3 State Farm Plaza N-3 Bloomington, IL 61791

SYNCB/Husqvarna C/O PO Box 965036 Orlando, FL 32896-5036

SYNCB/Lowes PO Box 965005 Orlando, FL 32896

SYNCB/Sams PO Box 965005 Orlando, FL 32896-5005

SYNCB/Sams PO Box 965005 Orlando, FL 32896-5005

SYNCB/Value City Furniture PO Box 965036 Orlando, FL 32896

TD Bank USA/Target Credit PO Box 673 Minneapolis, MN 55440

Tractor Supply/CBNA PO Box 6497 Sioux Falls, SD 57117-6497 Universal Credit Services PO Box 158 Hartland, MI 48353

World's Foremost Bank 4800 NW First, STE 300 Lincoln, NE 68521

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